

ACTIVE SHOOTER IN THE WORKPLACE

Mike Whitmer:

We live in a world where safety is more of an issue than ever. There's online safety, our kids and schools, but what about at work? Your work, the doctor's office. Recently we learned of a murder suicide at a practice in Illinois, and sadly, it's not the only incident. There have been attacks in hospitals, medical facilities, and small businesses, and no business is immune. It's a sad reality that we have to think about these things, but it's better to be prepared. We've asked a crisis expert from the Clive, Iowa Police Department to help us with this topic. Clive is a city of about 20,000 people right outside of Des Moines, Iowa, which is in NCMIC's hometown, a metro area of about 700,000 people. Officer Rehberg, thank you for joining us today.

Officer Rehberg:

Thank you for having me.

Mike Whitmer:

I can think of at least three situations that could bring violence into the workplace. A patient with mental health issues, a domestic violence situation or overflow activity, perhaps an active shooter in a business district where your practice is located. What goes into having a safety plan for our small business owners, for our practices, are staff, and our patients.

Officer Rehberg:

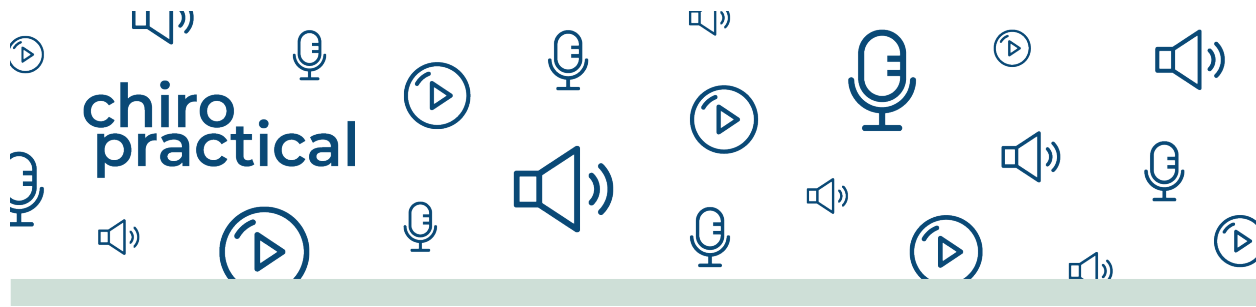
The biggest part that goes into it is just knowing your surroundings, knowing what type of building you're in, what location you're in and what resources you have. People are creatures of habit. We tend to do things the same way over and over again. There might be multiple ways in and out of a building, but we tend to stick with one that we like in particular, there might potentially be alternate access or alternate exits that you could use. Just being aware of those types of things. Just overall security of the facility itself, whether it's a big building or just a portion of a strip mall that the office is in. Having an overall security plan, locking the doors and maybe you've got some sort of code word or access code that you would be able to put over a PA system, something like that. Everything's going to be different. It depends on the business, it depends on the setup that you have. There's not one plan that fits everybody.

Mike Whitmer:

If the threat is inside the office and irate customer or patient or a domestic violence situation that's overflowed into the office, what should the staff do?

Officer Rehberg:

Initially we would try to deescalate the situation, trying to get them back onto an emotional level where they can communicate. From there it's going to be situationally driven and maybe it's securing yourself into a room.



At that point. We have to have a plan. We have to have a backup plan in order to keep ourselves safe and keep our coworkers and other people safe.

Mike Whitmer:

I would assume that part of that plan would be while somebody's trying to deescalate the situation, somebody else is making contact with authorities,

Officer Rehberg:

Calling 911, getting ahold of somebody. If you have a panic button, police aren't waiting outside your business for something bad to happen. We're out doing other things, so there's always an amount of time between contacting us and getting us there. That's where run hide fight really comes into play. You might be dependent on yourselves within your own pod of coworkers to protect yourselves and protect your business.

Mike Whitmer:

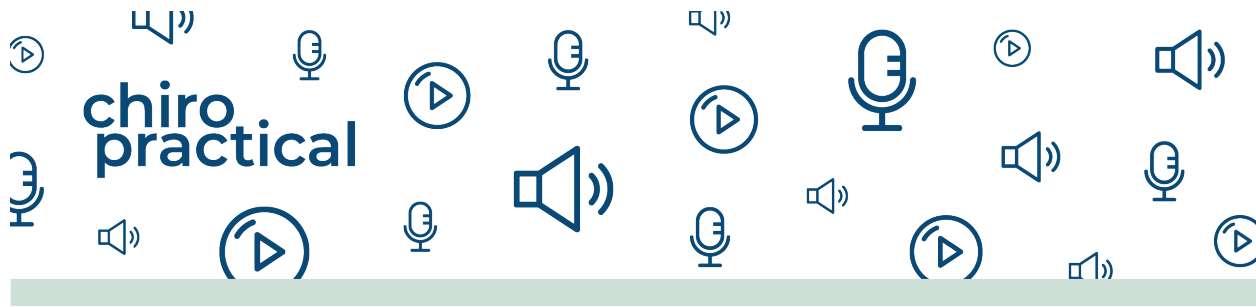
What is that?

Officer Rehberg:

Run hide fight is a self-preservation concept. The term we use now is active killer because there's multiple ways that people are doing these things right now. We think back to Columbine as the first active shooter. That was back in 2001, I believe. Mass shootings and mass killings predate that by quite a bit. Social media and 24 hour news cycle comes into place. As those events continued to evolve and got worse and worse with time, we've developed this run hide fight concept. Which is if something happens, run away and get to a safe spot. It's a practice that any business can employ. It's the process of self-preservation and getting your employees into a position where they can better protect themselves, protect others, get away from the bad guy that's in the business. Short of that, short of running away from the threat or hiding from the threat or barricading yourself into the building, you have the third option of fighting back and at some point there might be that potential that you would have to do that to protect your own life or the life of somebody else that you care about.

When that time comes, that's situationally driven, but at some point that may be your third and final option. When you've run from the threat, you've hidden from that threat and that threat is still coming to get you, you've gone to the furthest back room that you could physically go to, you've barricaded yourself in there and that person somehow is getting through that door. What are you going to do? Are you going to lay down and take it or are you going to fight back? And it's a mindset. You got to commit to it 100%, you can't go halfway. You if you're going to fight back, you got to go a hundred percent. There's no other way to say it, but you have to be ready to kill that person to keep them from killing you. That's what their goal is, so now it's time to fight back, and what are you going to do? Grab the fire extinguisher, grab the garbage can take a pair of scissors, a plate. If you're in the break room, start swinging things around and hitting people.

That's the whole concept of run, hide, fight. It's all about protecting yourself and protecting those that are with you. Everything else is secondary. The police are there to protect and we're going to do everything that we can to protect everybody that's in our charge. That's why we're here, but the reality is we can't always be there



when you need us to be there. There has to be something that everybody can do to help preserve their own lives and futures and the futures of those people that are around them.

Mike Whitmer:

How do you know which one to deploy?

Officer Rehberg:

Drop everything. Don't pick up purses. Don't pick up briefcases. Run and get away from whatever that threat might be. If you can't run away and get away from it, then the next step is hide and lock yourself in a room. Shut the lights off, make sure all the locks are set. Hide behind a chair or a desk. Flip things up against the door. Whatever you can do to protect yourself, yourself and make yourself less of a target, that's going to be helpful in that hide situation. If you are locked into a room, when that person comes by and pulls on that door and that door's locked, they're going to bypass that room. That's potentially that safety factor that you're adding in right there.

The third would be fight, and when all else fails, you can't run away. You can't hide. What are you going to do? Sometimes you have to be the one that fights what might be grabbing a garbage can that might be grabbing a fire extinguisher, a pair of scissors, whatever you could use as a weapon to defend yourself and protect the other people that are there with you. That's what you have to fight with, and we don't want to do that. Most people don't want to do that, but it's self-preservation and it's protection of life of the people that are around you, the people that we care about. When the police can't get there, who's going to step up and do that, and that's what the fight portion is.

It could go immediately to the fight. You don't have to go through the steps of run, hide, fight. You could do run and get away and everything's fine after that. You could do the run and hide and survive the incident or you could jump straight to the fight. It's not a one, two, three, step. Jump to any level of that continuum.

Mike Whitmer:

Great information. If the threat is outside the office, violent activity on the street nearby for example, what should your staff do at that point?

Officer Rehberg:

We saw that a couple years ago with all the civil unrest that was going on and people marching in the streets and going through business districts and things like that. If you don't want to be a part of that, just lock your doors. That doesn't mean somebody can't break a window and come in that way, but if the door is locked and they're not targeting your business specifically, you're probably going to be safe and they're probably going to walk right past.

Mike Whitmer:

What if someone is brandishing a weapon, a knife or a gun in the doctor's practice? What action should be taken?



Officer Rehberg:

I would start with de-escalation and try to get back away from that person and lock myself into a room if there was no other way out. If it wasn't a secure lobby, then that's the route somebody should take is to try to get back into a protected area where this person can't get to and at the same time somebody should be calling 911 to get the police there, but if that's not possible, then you have to try to deescalate and use those verbal skills until you can get some additional help, unless that person's active trying to hurt somebody else or you. I would say jumping on them and trying to disarm them is probably not the route to go.

Now everything is situationally driven. A big part of de-escalation is active listening and just listening to what people are saying and you don't have to necessarily agree with what they're saying. Letting them understand that you know what they're saying and what they're feeling and that that's a real thing. That's their perception at the time. We can let them know that we understand that they feel a certain way and they might have experienced something that we can empathize with a little bit. Every situation again, is going to be different, but if you can employ those active listening skills and that's something that everybody can work on, it's really something that you're going to have to evaluate when it comes down to it. We can what if it all day long, but at the end of the day it's going to come down to what that person is feeling and seeing at that time.

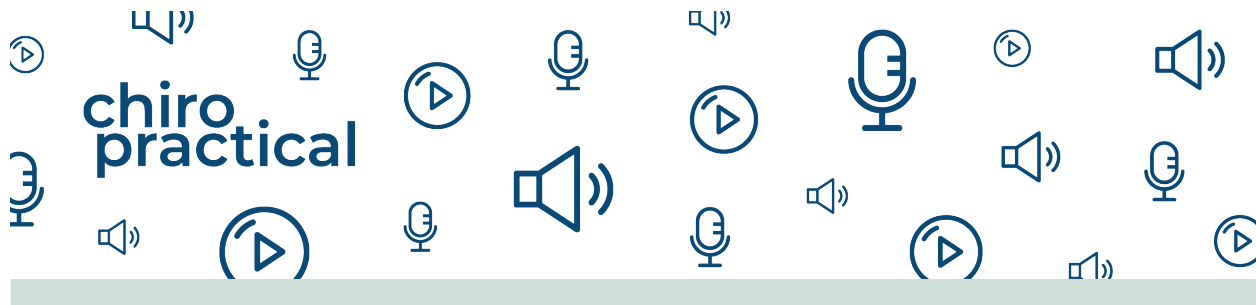
Tasers are legal. Electronic control devices are legal for people to own. You could have something like that behind the counter. We don't use bear spray, but we used pepper spray. For a long time, it was our way or the highway and we were going to tell you to do something, and you were going to do it and it didn't matter what you said as a victim or a suspect or anybody else that we would deal with, and now we know that if we listen to you just a little bit, it gets us a whole lot further and we're able to accomplish a whole lot more and we don't have to use force and we don't have to arrest people and that's our goal anymore is people that were undergoing mental health issues, that's where they went, was to jail and now we realize that's probably not where they needed to be and we've finding alternates for that, so that plays into that active listening as well. It's a skill that everybody can use and continue to work on.

Mike Whitmer:

When you're talking about things like de-escalation skills and run, hide, fight and some of those skills that personally, I've never really given that much thought. I would expect that a lot of our doctors listening haven't given it a lot of thought either. Are there other resources, seminars, online resources that doctors and small businesses could use to help themselves ed educated and educate their teams on proper processes?

Officer Rehberg:

This is a topic that most people don't think about until it happens and by then it's too late. There are resources that are available. YouTube is a great resource. I can go to YouTube and find a de-escalation video right now. Active listening skills, I can go find a YouTube video on that right now. Department of Homeland Security has good resources for run, hide, fight. They have about a 10 minute video. It outlines the run, hide, fight, why you should do it, the benefits of doing it. It's fairly common to see this intimate violence between husband and wife, boyfriend, girlfriend, those types of people take place in the workplace, so nothing else really changes. All the steps that you're going to take to address that violent act or that behavior in the workplace you're still going to take with the phone calls to the police and running, hiding, fighting, all those types of things, de-escalation .



It's good to role play and we do that with field training. Do you have a way to get out of the back? Can you leave that person in the front locked on the front lobby? If you leave, where are they going to go? Those are the types of things you would've to think about a lot of the time. These calls come out that I might not go on, but I have a new officer role play through that call. You can do that in the office. Anybody can do that. Takes a matter of minutes to get everybody together on a Monday morning and say, "Hey, this is our scenario. What are we going to do?" You can talk through it.

Mike Whitmer:

In a situation like this, should there be any prioritization patients that are in the practice, staff taking care of them, first or anything like that? Or is it all bets are often every person for themselves?

Officer Rehberg:

There's two thoughts to that. One is yes, you can prioritize innocence, any victims that you have, and then bad guys. How we look at it from a SWAT perspective. Or it's who can I get to first and I'll help that person? Does that mean that somebody else and maybe they don't get the help they need? Yeah it does, but that's the reality of it. You deal with it as best that you can and we can put ourselves in that situation and talk about it, but until it really happens, the rubber meets the road. I guess we don't know what we're going to do.

Mike Whitmer:

The situation's going to dictate what you're able to do.

Officer Rehberg:

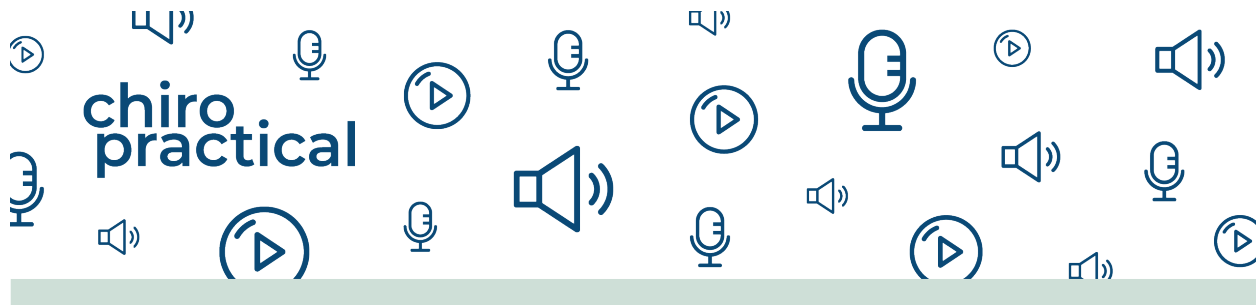
Absolutely.

Mike Whitmer:

We also think you would need to know roles and responsibilities of each person that's normally in the office. This person is going to call 911. This person is going to, I don't know, go out the back door or lead people to the back door. I would think that would be part of it too.

Officer Rehberg:

Everybody's going to have those roles and responsibilities. I wouldn't say if this happens, you're going to do this and you're going to do this. It might be if you're in the back, you're going to do this. If you're in the front, you're going to do this. Again, it's situational. It's taking into consideration physical presence of where they are as opposed to this is your specific duty. If this were to happen, there's a quote, "Don't rise to the occasion, we fall to our level of training." I think that's true. You do what you know and under stress, that might not be the best thing, but it's what you're trained for, you're going to follow that. Instinct is the same way. I think we've come a long way in these active killer scenarios. In Columbine, you saw everybody huddling in the lunchroom and we saw what happened there. This run, hide fight concept I think is a game changer. You might not practice it every day, but if you watched the videos and you're aware of the concepts, I think that's huge. Getting out, running



away from the bad guy, getting out and going out the back of the building. That has saved lives and it's still a relatively new concept. It's just not one that has gotten out to everybody.

Mike Whitmer:

One of the colleges I work with did active killer training on campus with their faculty and administrators. They said that was so eye-opening how difficult it is. Active killer walks in, what do you do? It was chaos. They didn't know what to do. Going through the training forced them to think about this stuff. The thing with the run, hide, fight makes it extremely difficult for the killer to achieve their objective because everything's scattered. Everybody's not gathered in the cafeteria. Like you said.

Officer Rehberg:

As bad as these situations have been, all these mass killings, we learn things from each one. It's terrible that they have to happen, but the response that we craft has changed with every instance of an active killer, there's something that we have learned from it. And the unfortunate reality is we're probably going to keep learning from them. We used to have a system called Code Red and that just switched to a new countywide system, but it's essentially a reverse 911. Throw your phone number on this site and then we can make a notification through either cell phones or home phones through that system within however big of a radius we want to, in a matter of minutes, we can hit several thousand.

Mike Whitmer:

So is that a recommendation that you would have for small businesses to be proactive with registering their numbers and things like that so that they can get up to date, timely information when there are emergencies in the area that they may need to take action?

Officer Rehberg:

If there's a service like this in their communities, I would sign up for it.

Mike Whitmer:

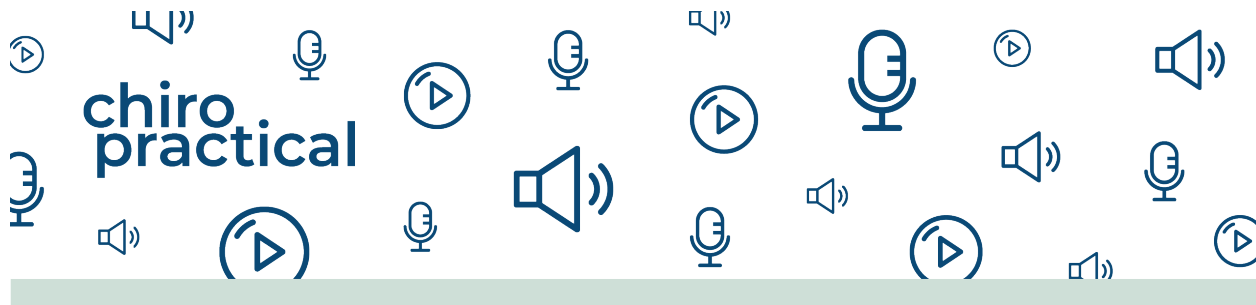
If there is one thing our doctors listening can do in these active killer situations, it would be run, hide, fight?

Officer Rehberg:

Run, hide, fight, puts the burden on the individual, to now they're, they got some skin in the game, but we fight harder when we got some skin in the game. That's what we need people to do. You guys keep fighting until we get there and we're going to come in and we might be doing some cleanup, but we'll come in and pick up where you have started. You can call police department, sheriff's office, state police. They will have somebody that can come do a threat assessment for you.

Mike Whitmer:

Officer Rehberg, thank you for joining us today.



Officer Rehberg:

Thank you for having me.

Mike Whitmer:

It's time for Ask NCMIC where we take your questions and have experts provide answers. When I'm traveling around for NCMIC, I talk to a lot of doctors that have questions about risks they face with their patients. Whether it's a patient who had a bad outcome or a question about how to document a difficult patient encounter. I always tell them, call us, get some advice, but frequently I met with resistance. The doctor is concerned about a claim being opened on them or their rates going up as a result of the call. So what should doctors do with situations in their practice they don't necessarily know how to handle. To help us with this question, I'm happy to have Keith Henaman with us. Keith is Senior Vice President of claims here at NCMIC. Keith, what would you like our doctors to know?

Keith Henaman:

Thanks for having me, Mike. The first thing I'd like the doctors to know is that there's no situation that they're likely going to encounter in their office that we haven't handled here at NCMIC with the vast amount of experience that we have in our claims department, so please call us. More times than not, we can cut a situation off before it even becomes a claim.

Mike Whitmer:

So Keith, if doctor calls in with a question like this, is there a cost associated with that? Are they going to have to pay for that advice?

Keith Henaman:

There's no cost associated with the doctor calling in to get risk management advice.

Mike Whitmer:

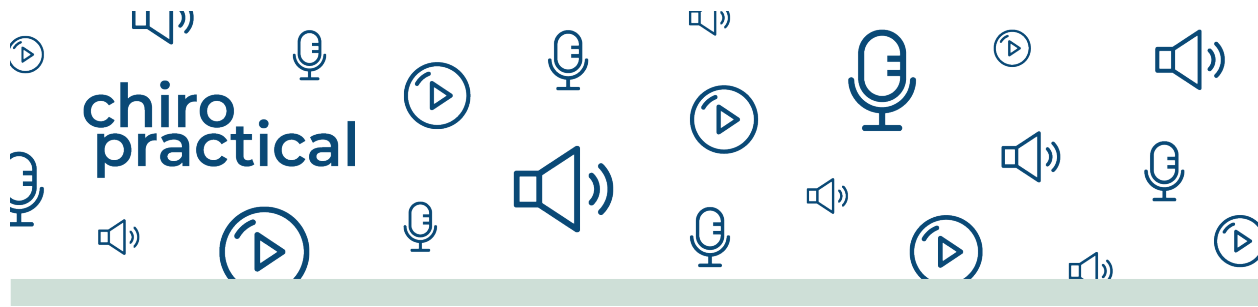
So what if a claim is eventually filed? What does the cost to the doctor entail in that scenario?

Keith Henaman:

Again, really the only cost is the doctor's time to call it in and talk with us. There's no out-of-pocket cost because if we retain an attorney to defend the doctor because of that particular claim, those costs are outside and separate from their limits. So unlike some professional liability policies, the costs associated with defending one of our chiropractors does not diminish the limits of liability that are available to defend the claim.

Mike Whitmer:

Thanks Keith for joining us and helping us with these questions.



Thank you for listening. In the show notes, we have resources from Officer Rehberg including a link to the Department of Homeland Security preparedness training on run hide fight. If you have kids, they're likely familiar with this as it's what's being used in schools and other public spaces. We also have posted several other useful resources. If you like what you heard today, please give us a rating on your podcast app. It helps others find our show. Thanks for listening and talk again soon.

Resources:

Active Shooter Pocket Card

https://www.dhs.gov/xlibrary/assets/active_shooter_pocket_card.pdf

Active Shooter Preparedness Video

<https://www.cisa.gov/options-consideration-active-shooter-preparedness-video>

Security Awareness for Healthcare Facilities

https://www.cisa.gov/sites/default/files/publications/19_0515_cisa_action-guide-hospitals-and-healthcare.pdf

De-escalation and Conflict Resolution Training Video

<https://www.youtube.com/watch?v=115JVuvMB4A>